

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
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Secretary of State
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**Certificate of Withdrawal of
Assumed Name**

CWA

Pursuant to the provisions of KRS chapter 365, the undersigned applicant applies to withdraw an assumed name, and for that purpose, submits the following statements:

1. The assumed name to be withdrawn is:

HOME INSTEAD SENIOR CARE LOUISVILLE

2. The assumed name has been discontinued by:

Louisville Home Care, Inc.

3. The certificate of assumed name was filed with the Secretary of State on Wednesday, April 29, 2020

4. This certificate will be effective upon filing.

5. The current mailing address is:

4101 TAYLORSVILLE RD SUITE 200, LOUISVILLE

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Brent Beanblossom